



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: INDIANA SKIN CANCER AMBULATORY SURGERY CENTER

Street Address: 701 E County Line Road Ste 208

City: Greenwood

County: Indiana

Administrator Name: Michael Murphy

Administrator Email: murphymd1@gmail.com

ASC Web Address:

Fiscal Year: 2017

Accredited: Yes No

Name of Accrediting Body:

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	3042	3042
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
13132	841	
13121	492	
15260	373	
14061	223	
13101	210	
14060	194	
13152	160	

14041	139
15220	73
15240	40

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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